

UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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| APPLICATION NUMBER | FILING/RECEIPT DATE | FIRST NAMED APPLICANT | ATTORNEY DOCKET NUMBER |
|--------------------|---------------------|-----------------------|-------------------------|
| 09/905,715 | 05/04/2001 | Steven M. Rothman | WSHU 2030 1908-95650 |

CONFIRMATION NO. 9398

000321
SENNIGER POWERS LEAVITT AND ROEDEL
ONE METROPOLITAN SQUARE
16TH FLOOR
ST LOUIS, MO 63102

FORMALITIES LETTER



OC000000008325272

Date Mailed: 06/20/2002

NOTICE TO FILE MISSING PARTS OF NONPROVISIONAL APPLICATION

FILED UNDER 37 CFR 1.53(b)

08/20/2002 AOSMAN1 00000074 09905715

01 FC:205 65.00 OP
02 FC:204 140.00 OP

Filing Date Granted

Items Required To Avoid Abandonment:

An application number and filing date have been accorded to this application. The item(s) indicated below, however, are missing. Applicant is given **TWO MONTHS** from the date of this Notice within which to file all required items and pay any fees required below to avoid abandonment. Extensions of time may be obtained by filing a petition accompanied by the extension fee under the provisions of 37 CFR 1.136(a).

- The oath or declaration is missing.
A properly signed oath or declaration in compliance with 37 CFR 1.63, identifying the application by the above Application Number and Filing Date, is required.
- To avoid abandonment, a late filing fee or oath or declaration surcharge as set forth in 37 CFR 1.16(l) of \$65 for a small entity in compliance with 37 CFR 1.27, must be submitted with the missing items identified in this letter.

Items Required To Avoid Processing Delays:

The item(s) indicated below are also required and should be submitted with any reply to this notice to avoid further processing delays.

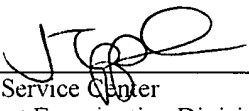
- Additional claim fees of **\$140** as a small entity, including any required multiple dependent claim fee, are required. Applicant must submit the additional claim fees or cancel the additional claims for which fees are due.

SUMMARY OF FEES DUE:

Total additional fee(s) required for this application is **\$205** for a Small Entity

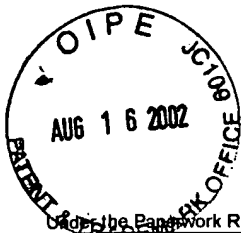
- \$65** Late oath or declaration Surcharge.
- Total additional claim fee(s) for this application is **\$140**
 - \$140** for multiple dependent claim surcharge.

A copy of this notice MUST be returned with the reply.



Customer Service Center
Initial Patent Examination Division (703) 308-1202

PART 2 - COPY TO BE RETURNED WITH RESPONSE



8-19-02

0500 360

MP 5

PTO/SB/21 (08-00)
Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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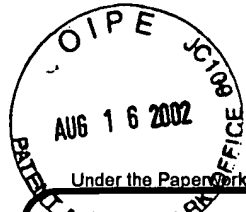
| | | | |
|--|----------------------|------------------------|------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 09/905,715 | |
| | Filing Date | 05/04/2001 | |
| | First Named Inventor | Steven M. Rothman | |
| | Group Art Unit | 3739 | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 7 | Attorney Docket Number | 1908-95650 |

| ENCLOSURES (check all that apply) | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for an Application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences |
| <input type="checkbox"/> Amendment / Reply | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final | <input type="checkbox"/> Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition to Convert to a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <input type="checkbox"/> Express Abandonment Request | <input type="checkbox"/> Terminal Disclaimer | |
| <input type="checkbox"/> Information Disclosure Statement | <input type="checkbox"/> Request for Refund | |
| <input type="checkbox"/> Certified Copy of Priority Document(s) | <input type="checkbox"/> CD, Number of CD(s) _____ | |
| <input checked="" type="checkbox"/> Response to Missing Parts/ Incomplete Application | Remarks | |
| <input checked="" type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|---|
| Firm or Individual name | Matthew A. Rosenberg, #40,149 Blumenfeld, Kaplan & Sandweiss, P.C. |
| Signature | |
| Date | 08/16/2002 |

| CERTIFICATE OF MAILING | | | |
|---|--------------------|------|------------|
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 08/16/2002 | | | |
| Typed or printed name | Denise A. Barberis | | |
| Signature | | Date | 08/16/2002 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 205.00

Complete if Known

| | |
|----------------------|-------------------|
| Application Number | 09/905,715 |
| Filing Date | 05/04/2001 |
| First Named Inventor | Steven M. Rothman |
| Examiner Name | |
| Group Art Unit | 3739 |
| Attorney Docket No. | 1908-95650 |

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 50-1572
Deposit Account Name: Blumenfeld, Kaplan & Sandweiss, P.C.

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|-----|----------------------------|----------------------------|------------------------|----------|
| 101 | 740 | 201 370 | Utility filing fee | |
| 106 | 330 | 206 165 | Design filing fee | |
| 107 | 510 | 207 255 | Plant filing fee | |
| 108 | 740 | 208 370 | Reissue filing fee | |
| 114 | 160 | 214 80 | Provisional filing fee | |

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims: - 20** = X =
Independent Claims: - 3** = X =
Multiple Dependent: 140.00 = 140.00

| | Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|-----|----------------------------|----------------------------|--|
| 103 | 18 | 203 9 | Claims in excess of 20 |
| 102 | 84 | 202 42 | Independent claims in excess of 3 |
| 104 | 280 | 204 140 | Multiple dependent claim, if not paid |
| 109 | 84 | 209 42 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) 140.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|--|----------|
| 105 130 205 65 | | Surcharge - late filing fee or oath | 65.00 |
| 127 50 227 25 | | Surcharge - late provisional filing fee or cover sheet | |
| 139 130 139 130 | | Non-English specification | |
| 147 2,520 147 2,520 | | For filing a request for <i>ex parte</i> reexamination | |
| 112 920* 112 920* | | Requesting publication of SIR prior to Examiner action | |
| 113 1,840* 113 1,840* | | Requesting publication of SIR after Examiner action | |
| 115 110 215 55 | | Extension for reply within first month | |
| 116 400 216 200 | | Extension for reply within second month | |
| 117 920 217 460 | | Extension for reply within third month | |
| 118 1,440 218 720 | | Extension for reply within fourth month | |
| 128 1,960 228 980 | | Extension for reply within fifth month | |
| 119 320 219 160 | | Notice of Appeal | |
| 120 320 220 160 | | Filing a brief in support of an appeal | |
| 121 280 221 140 | | Request for oral hearing | |
| 138 1,510 138 1,510 | | Petition to institute a public use proceeding | |
| 140 110 240 55 | | Petition to revive - unavoidable | |
| 141 1,280 241 640 | | Petition to revive - unintentional | |
| 142 1,280 242 640 | | Utility issue fee (or reissue) | |
| 143 460 243 230 | | Design issue fee | |
| 144 620 244 310 | | Plant issue fee | |
| 122 130 122 130 | | Petitions to the Commissioner | |
| 123 50 123 50 | | Processing fee under 37 CFR 1.17(q) | |
| 126 180 126 180 | | Submission of Information Disclosure Stmt | |
| 581 40 581 40 | | Recording each patent assignment per property (times number of properties) | |
| 146 740 246 370 | | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 740 249 370 | | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 740 279 370 | | Request for Continued Examination (RCE) | |
| 169 900 169 900 | | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) 65.00

SUBMITTED BY

| | | | | | |
|-------------------|----------------------|-----------------------------------|------------|-----------|--------------|
| Name (Print/Type) | Matthew A. Rosenberg | Registration No. (Attorney/Agent) | 40149 | Telephone | 314-863-0800 |
| Signature | | Date | 08/16/2002 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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